

**CLAIM OF  
BENEFICIAL USE  
for Transfer with Multiple  
Changes – Surface Water and  
Groundwater**



Oregon Water Resources Department  
725 Summer Street NE, Suite A  
Salem, Oregon 97301-1266  
(503) 986-0900  
[www.oregon.gov/OWRD](http://www.oregon.gov/OWRD)

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**A fee of \$230 must accompany this form for any Transfer final orders including a water right with a priority date of July 9, 1987, or later.**

**Example – A transfer involves 5 rights and one of the rights has a priority date of July 9, 1987, or later, the fee is required.**

**A separate form shall be completed for each transfer.**

This form is subject to revision. **Begin each new claim** by checking for a new version of this form at:  
<https://www.oregon.gov/OWRD/Forms/Pages/default.aspx>

The completion of this form is required by OAR 690-014-0100(1) and 690-014-0110(4).

Please type or print in dark ink. If this form is found to contain errors or omissions, it may be returned to you. **Every item must have a response.** If any requested information does not apply to the claim, insert "NA." **Do not delete or alter any section of this form unless directed by the form.** The Department may require the submittal of additional information from any water user or authorized agent.

"Section 7" of this form is intended to aid in the completion of this form and should not be submitted.

A claim of beneficial use includes both this report and a map. If the map is being mailed separately from this form, please include a note with this form indicating such.

If you have questions regarding the completion of this form, please call 503-979-9103.

The Department has a program that allows it to enter into a voluntary agreement with an applicant for expedited services. Under such an agreement, the applicant pays the cost to hire additional staff that would not otherwise be available. This program means a certificate may be issued in about a month. For more information on this program see:

<https://www.oregon.gov/OWRD/programs/WaterRights/RA/Pages/default.aspx>

**SECTION 1**

**GENERAL INFORMATION**

**Type of Authorized Change**

This Claim is being submitted for a transfer involving multiple changes.

**YES**

Mark all that apply:

- |  |  |
|--|--|
| 1. <input checked="" type="checkbox"/> Change in POD(s) or Additional POD(s) | 4. <input type="checkbox"/> Change in Character of Use             |
| 2. <input checked="" type="checkbox"/> Change in POA(s) or Additional POA(s) | 5. <input type="checkbox"/> Change in Character of Use – Reservoir |
| 3. <input checked="" type="checkbox"/> Change in Place of Use                |  |

*A separate section will be completed for each type of change authorized in the transfer final order.*

1. File Information

APPLICATION #  
**T-13395**

2. Property Owner (current owner information)

APPLICANT/BUSINESS NAME <b>Dunbar Silvies River Ranch, LLC</b>		PHONE NO. <b>907-441-4746</b>	ADDITIONAL CONTACT NO.
ADDRESS <b>9622 Victor Rd</b>			
CITY <b>Anchorage</b>	STATE <b>AK</b>	ZIP <b>99515</b>	E-MAIL <b>mindyrokeyddllc@ak.net</b>

If the current property owner is not the transfer holder of record, it is recommended that an assignment be filed with the Department. **Each** transfer holder of record must sign this form.

3. Transfer holder of record (this may, or may not, be the current property owner)

TRANSFER HOLDER OF RECORD <b>Same as above</b>		
ADDRESS		
CITY	STATE	ZIP

4. Date of Site Inspection:

**8/1/2024**

5. Person(s) interviewed and description of their association with the project:

NAME	DATE	ASSOCIATION WITH THE PROJECT
<b>Andy Root</b>	<b>11/12/2019</b>	<b>Farm Manager</b>
<b>Matt Nonenmacher</b>	<b>8/1/2024</b>	<b>Pump Setter</b>

6. County:

**Harney**

7. If any property described in the place of use of the transfer final order is excluded from this report, identify the owner of record for that property (ORS 537.230(5)):

OWNER OF RECORD <b>NA</b>		
ADDRESS		
CITY	STATE	ZIP

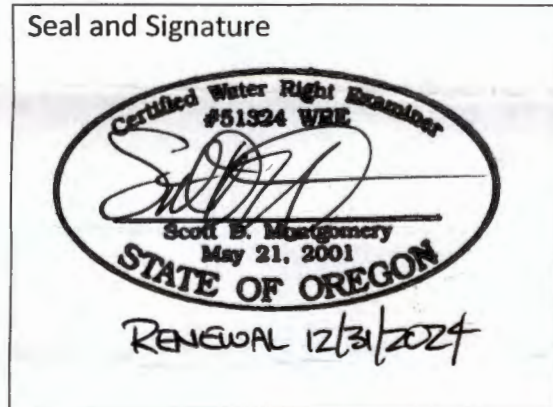
Add additional tables for owners of record as needed

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## SECTION 2 SIGNATURES

### CWRE Statement, Seal and Signature

The facts contained in this Claim of Beneficial Use are true and correct to the best of my knowledge.



<b>CWRE NAME</b> <b>Scott D Montgomery</b>	<b>PHONE NO.</b> <b>541-548-5833</b>	<b>ADDITIONAL CONTACT NO.</b> <b>541-420-0401</b>
<b>ADDRESS</b> <b>PO Box 767</b>		
<b>CITY</b> <b>Terrebonne</b>	<b>STATE</b> <b>OR</b>	<b>ZIP</b> <b>97760</b>
<b>E-MAIL</b> <b>scott@apeands.com</b>		

### Transfer Holder of Record Signature or Acknowledgement

**Each** transfer holder of record must sign this form in the space provided below.

The facts contained in this Claim of Beneficial Use are true and correct to the best of my knowledge. I request that the Department issue a water right certificate.

SIGNATURE	PRINT OR TYPE NAME	TITLE	DATE
	<b>William J. Dunbar</b>	<b>Managing Member</b>	<b>9/26/2024</b>

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## SECTION 3

### Changes Made

**Note: The Claim only needs to describe the changes that were authorized in the transfer final order.**

#### Change #1

#### New or Additional Point of Diversion

#### Change in POD(s) or Additional POD(s)

Did the transfer order authorize a change in the points of diversion or additional points of diversion? **YES**

#### 1. New or additional point of diversion name or number:

POINT OF DIVERSION (POD) NAME OR NUMBER (CORRESPOND TO MAP)	SOURCE
<b>POD 4</b>	<b>Poison Slough a tributary of Poison Creek</b>

#### 2. Variations:

Was the use developed differently from what was authorized by the transfer final order, or extension final? **NO**

If yes, describe below.

(e.g. "The order allowed three new/additional points of diversion. The water user only developed one of the points.")

#### 3. Claim Summary:

NEW OR ADDITIONAL POD NAME OR #	MAXIMUM RATE AUTHORIZED IN ORDER	CALCULATED THEORETICAL RATE BASED ON SYSTEM	AMOUNT OF WATER MEASURED
<b>POD 4</b>	<b>2.0 cfs</b>	<b>10.69 cfs</b>	<b>Dry</b>

#### System Description

Are there multiple new or additional Points of Diversion (POD)? **NO**

POD Name or Number this section describes (only needed if there is more than one):

**POD 4**

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## A. POD System Information

Provide the following information concerning the point of diversion. Information provided must describe the equipment used to appropriate water from the point of diversion.

### 1. Pump Information **NO PUMP OR MOTOR**

MANUFACTURER	MODEL	SERIAL NUMBER	TYPE (CENTRIFUGAL, TURBINE OR SUBMERSIBLE)	INTAKE SIZE	DISCHARGE SIZE
None					

### 2. Motor Information

MANUFACTURER	HORSEPOWER
None	

### 3. Theoretical Pump Capacity

HORSEPOWER	OPERATING PSI	LIFT FROM SOURCE TO PUMP	LIFT FROM PUMP TO PLACE OF USE	TOTAL PUMP OUTPUT (IN CFS)
NA				

### 4. Provide pump calculations:

NA
----

### 5. Measured Pump Capacity (using meter if meter was present and system was operating)

INITIAL METER READING	ENDING METER READING	DURATION OF TIME OBSERVED	TOTAL PUMP OUTPUT (IN CFS)
NA			

Reminder: For pump calculations use the reference information at the end of this document.

## B. Gravity Flow Pipe

(THE DEPARTMENT TYPICALLY USES THE HAZEN-WILLIAM'S FORMULA FOR A GRAVITY FLOW PIPE SYSTEM)

### 1. Does the diversion involve a gravity flow pipe?

YES

### 2. Complete the table:

PIPE SIZE	PIPE TYPE	"C" FACTOR	AMOUNT OF FALL	LENGTH OF PIPE	SLOPE	COMPUTED RATE OF WATER FLOW (IN CFS)
48'	CMP	100	0.3'	30LF	0.01 1/1	10.90

### 3. Provide calculations:

$Q = 1.31 \times C \times R^{0.63} \times S^{0.54} = (1.31)(100)(1)^{0.63} (0.01)^{0.54} = 10.90 \text{ cfs}$ $R = 4/4 = 1'$	Received OCT 10 2024 OWRD
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4. If an actual measurement was taken, provide the following:

DATE OF MEASUREMENT	WHO MADE THE MEASUREMENT	MEASUREMENT METHOD	MEASURED QUANTITY OF WATER (IN CFS)
Dry			

Attach measurement notes.

### C. Gravity Flow Canal or Ditch

(THE DEPARTMENT TYPICALLY USES MANNING'S FORMULA FOR CANALS AND DITCHES)

1. Does the diversion involve a gravity flow ditch or canal?

YES

2. Complete the table:

CANAL OR DITCH TYPE (MATERIAL)	TOP WIDTH OF CANAL OR DITCH	BOTTOM WIDTH OF CANAL OR DITCH	DEPTH	"N" FACTOR	AMOUNT OF FALL	LENGTH OF CANAL / DITCH	SLOPE	COMPUTED RATE (IN CFS)
Grass	8'	2'	1'	0.035	0.5'	100 LF	0.005 1/1	10.69

3. Provide calculations:

$$Q = \frac{1.486}{N} \times A \times R^{2/3} \times S^{1/2} = \frac{1.486}{0.035} (5) (0.6)^{2/3} (0.005)^{1/2} = 10.69 \text{ cfs}$$

$$A = \frac{8' + 2'}{2} \times 1 = (5 \text{ SF}) \quad P = 2' + 6.3' = 8.3' \quad R = A/P = 0.6'$$

4. If an actual measurement was taken, provide the following:

DATE OF MEASUREMENT	WHO MADE THE MEASUREMENT	MEASUREMENT METHOD	MEASURED QUANTITY OF WATER (IN CFS)
Dry			

Attach measurement notes.

D. Additional notes or comments related to the system:

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**Change #2**

**Change in POA(s) or Additional POA(s)**

Did the transfer order authorize a change in the points of appropriation or additional points of appropriation? **YES**

**1. New or additional point of appropriation name or number:**

POINT OF APPROPRIATION (POA) NAME OR NUMBER (CORRESPOND TO MAP)	WELL LOG ID # FOR ALL WORK PERFORMED ON THE WELL (IF APPLICABLE)	WELL TAG # (IF APPLICABLE)	SOURCE (IF LISTED IN TRANSFER FINAL ORDER)
#2	HARN 602	None	Poison Cr Slough (Silvies River)
#3	HARN 52832	L133823	Poison Cr Slough (Silvies River)
Howes	HARN 592	None	Silvies River

Attach each well log available for the well (include the log for the original well and any subsequent alterations, reconstructions, or deepenings)

**2. Variations:**

Was the use developed differently from what was authorized by the transfer final order, or extension final?

**NO**

If yes, describe below.

(e.g. "The order allowed three new/additional points of appropriation. The water user only developed one of the points.")

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### 3. Claim Summary:

NEW OR ADDITIONAL POA NAME OR #	MAXIMUM RATE AUTHORIZED	CALCULATED THEORETICAL RATE BASED ON SYSTEM	AMOUNT OF WATER MEASURED
#2	1/80 cfs/acre	1.17 cfs	Off
#3	1/80 cfs/acre	1.17 cfs	Off
Howes #2	1/80 cfs/acre	1.17 cfs	Off

### System Description

Are there multiple new or additional Points of Appropriation (POA)?

YES

POA Name or Number this section describes (only needed if there is more than one):

#2 (Jacobs)

### A. POA System Information

Provide the following information concerning the point of appropriation. Information provided must describe the equipment used to appropriate water from the point of appropriation.

#### 1. Pump Information

MANUFACTURER	MODEL	SERIAL NUMBER	TYPE (CENTRIFUGAL, TURBINE OR SUBMERSIBLE)	INTAKE SIZE	DISCHARGE SIZE
National	N230	UNK	Turbine	14"	8"

#### 2. Motor Information

MANUFACTURER	HORSEPOWER
US Electric	40

#### 3. Theoretical Pump Capacity

HORSEPOWER	OPERATING PSI	LIFT FROM SOURCE TO PUMP *If a WELL, THE WATER LEVEL DURING PUMPING	LIFT FROM PUMP TO PLACE OF USE	TOTAL PUMP OUTPUT (IN CFS)
40	40	140'0	0'	1.17

#### 4. Provide pump calculations:

$$Q = \frac{7.04 \text{ ft}^3}{4 \text{ hp} \times \text{hp}} = \frac{(7.04)(40)}{160} = 1.17$$

Total head, ft 241.6

$$\text{Total head} = 101.6' + 140' + 0' = 241.6'$$

#### 5. Measured Pump Capacity (using meter if meter was present and system was operating)

INITIAL METER READING	ENDING METER READING	DURATION OF TIME OBSERVED	TOTAL PUMP OUTPUT (IN CFS)
Not running			

Reminder: For pump calculations use the reference information at the end of this document.

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### B. Groundwater Source Information (Well and Sump)



1. Is the appropriation from a dug well (sump)?

NO

**C. Additional notes or comments related to the system:**

POA Name or Number this section describes (only needed if there is more than one):

#3 (APOA)

**A. POA System Information**

Provide the following information concerning the point of appropriation. Information provided must describe the equipment used to appropriate water from the point of appropriation.

**1. Pump Information**

MANUFACTURER	MODEL	SERIAL NUMBER	TYPE (CENTRIFUGAL, TURBINE OR SUBMERSIBLE)	INTAKE SIZE	DISCHARGE SIZE
Gould	UNK	161214	Turbine	12"	8"

**2. Motor Information**

MANUFACTURER	HORSEPOWER
GE	40

**3. Theoretical Pump Capacity**

HORSEPOWER	OPERATING PSI	LIFT FROM SOURCE TO PUMP *If a well, the water level DURING PUMPING	LIFT FROM PUMP TO PLACE OF USE	TOTAL PUMP OUTPUT (IN CFS)
40	40	140'	0'	1.17

**4. Provide pump calculations:**

$$Q = 7.04 \text{ ft}^4/5/\text{hp} \times \text{hp} = (7.04)(40) = 1.17 \text{ cfs}$$

$$\text{Total head, ft} = 241.6$$

$$\text{Total head} = 101.6' + 140' + 0' = 241.6'$$

**5. Measured Pump Capacity (using meter if meter was present and system was operating)**

INITIAL METER READING	ENDING METER READING	DURATION OF TIME OBSERVED	TOTAL PUMP OUTPUT (IN CFS)
Not running			

Reminder: For pump calculations use the reference information at the end of this document.

**B. Groundwater Source Information (Well and Sump)**

1. Is the appropriation from a dug well (sump)?

NO

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### C. Additional notes or comments related to the system:

POA Name or Number this section describes (only needed if there is more than one):

Howes (Howes #2)

### A. POA System Information

Provide the following information concerning the point of appropriation. Information provided must describe the equipment used to appropriate water from the point of appropriation.

#### 1. Pump Information

MANUFACTURER	MODEL	SERIAL NUMBER	TYPE (CENTRIFUGAL, TURBINE OR SUBMERSIBLE)	INTAKE SIZE	DISCHARGE SIZE
Johnston	UNK	UNK	Turbine	12"	8"

#### 2. Motor Information

MANUFACTURER	HORSEPOWER
GE	30

#### 3. Theoretical Pump Capacity

HORSEPOWER	OPERATING PSI	LIFT FROM SOURCE TO PUMP *If a well, the water level DURING PUMPING	LIFT FROM PUMP TO PLACE OF USE	TOTAL PUMP OUTPUT (IN CFS)
30	30	100'	5'	1.17

#### 4. Provide pump calculations:

$Q = 7.04 \text{ ft}^4/5/\text{hp} \times \text{hp} = (7.04)(30) = 1.17 \text{ cfs}$
Total head, ft                      181.2
Total head = 76.2' + 100' + 5' = 181.2'

#### 5. Measured Pump Capacity (using meter if meter was present and system was operating)

INITIAL METER READING	ENDING METER READING	DURATION OF TIME OBSERVED	TOTAL PUMP OUTPUT (IN CFS)
Not running			

Reminder: For pump calculations use the reference information at the end of this document.

### B. Groundwater Source Information (Well and Sump)

#### 1. Is the appropriation from a dug well (sump)?

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**C. Additional notes or comments related to the system:**

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### Change #3

#### Change in Place of Use

Did the transfer order authorize a change in the place of use?

**YES**

#### 1. Claim Summary – Authorized Use:

If Irrigation or Nursery Use:

THE # OF ACRES ALLOWED	THE # OF ACRES DEVELOPED
<b>68.1</b>	<b>68.1</b>

If the new use(s) was not irrigation or nursery:

NEW USE(S)	WAS THE NEW PLACE OF USE DEVELOPED TO THE FULL EXTENT AUTHORIZED UNDER THE ORDER? (INCLUDE THE LOCATION OF THE DEVELOPED PLACE USE ON THE CLAIM MAP)
	<b>NA</b>
	<b>NA</b>

#### 2. Variations:

Was the use developed differently from what was authorized by the transfer final order?

**NO**

If yes, describe below.

(e.g. "The order authorized a change in place of use for 40 acres. The water user only developed 38 acres.")

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**Change #4**

**Change in Character of Use**

Did the transfer order authorize a change in character of use?

**NO**

**Change #5**

**Change in Character of Use – Reservoir**

Did the transfer order authorize a change in character of use for a reservoir?

**NO**

**SECTION 4**

**CONDITIONS**

All conditions contained in the transfer final order, or any extension final order shall be addressed. Reports that do not address all performance related conditions will be returned.

**1. Time Limits:**

Describe how the water user has complied with each of the development timelines established in the transfer final order and any extensions of time issued for the transfer:

	DATE FROM TRANSFER	DATE THE AUTHORIZED CHANGES WERE COMPLETED *THIS DATE MUST FALL BETWEEN THE "ISSUANCE DATE" AND THE "COMPLETENESS DATE"
ISSUANCE DATE	01/03/2022	
COMPLETENESS DATE FROM ORDER (C)	10/1/2023	Spring 2022

\* MUST BE WITHIN PERIOD BETWEEN TRANSFER FINAL ORDER, OR ANY EXTENSION FINAL ORDER ISSUANCE AND THE DATE TO COMPLETE THE CHANGE

**2. Is there an extension final order(s)?**

**NO**

**3. Measurement Conditions:**

a. Does the transfer final order, or any extension final order require the installation of a meter or other approved measuring device? **YES**

*If "NO", items b through f relating to this section may be deleted.*

**Reminder: If a meter or approved measuring device was required, the COBU map must indicate the location of the device in relation to the point of appropriation.**

b. Has a meter been installed?

**YES NO**

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c. Meter Information

POD/POA NAME OR #	MANUFACTURER	SERIAL #	CONDITION (WORKING OR NOT)	CURRENT METER READING	DATE INSTALLED
#2	Seametrics	10232615	Not running	0 AF	Spring 2022*
#3	Lindsay Growsmart	GT18061040	Not running	145961.8 galx1000	Fall 2019
Howes Well	Seametrics	05241777	Not running	0 AF	Spring 2022*

**\*Replacement flowmeters (installed September 2024)**

d. If a meter has not been installed, has a suitable measuring device been installed and approved by the Department? **NA**

e. If "YES", provide a copy of the letter approving the device, if available. If the letter is not available provide the name and title of the Water Resources Department employee approving the measuring device, and the approximate date of the approval:

NAME	TITLE	APPROXIMATE DATE

f. Measurement Device Description

DEVICE DESCRIPTION	CONDITION (WORKING OR NOT)	DATE INSTALLED

4. Recording and reporting conditions

a. Is the water user required to report the water use to the Department? **NO**

5. Fish Screening

a. Are any points of diversion required to be screened to prevent fish from entering the point of diversion? **NO**

6. By-pass Devices

a. Are any points of diversion required to have a by-pass device to prevent fish from entering the point of diversion? **NO**

7. Other conditions required by the transfer final order or extension final order:

a. Were there special well construction standards? **NO**

b. Was submittal of a ground water monitoring plan required? **NO**

c. Other conditions? **NO**

If "YES" to any of the above, identify the condition and describe the water user's actions to comply with the condition(s):

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**SECTION 5**  
**ATTACHMENTS**

Provide a list of any additional documents you are attaching to this report:

ATTACHMENT NAME	DESCRIPTION
Well logs	HARN 602, 52832 & 592
Site photos	Time, location stamped pictures of POD, POAs & POU

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## SECTION 6

### CLAIM OF BENEFICIAL USE MAP

The Claim of Beneficial Use Map must be submitted with this claim. Claims submitted without the Claim of Beneficial Use map will be returned. The map shall be submitted on polyester film at a scale of 1" = 1320 feet, 1" = 400 feet, or the original full-size scale of the county assessor map for the location.

The changes that were authorized under the transfer final order must be mapped based on the developed locations; new or additional points of appropriation and place of use.

In cases where the order involved additional points of appropriation, the additional points should be mapped based on their developed locations. The original points of appropriation should be mapped based on the original right of record at the time the transfer final order was issued.

In cases where the order involved changing the place of use for a portion of a water right, the portion of the place of use being changed should be mapped based on the developed location. If the transfer also included portions of the place of use that were not being modified, but were receiving a new or additional point of appropriation, the place of use for those lands should be mapped based on the original right of record at the time the transfer final order was issued.

Provide a general description of the survey method used to prepare the map. Examples of possible methods include, but are not limited to, a traverse survey, GPS, or the use of aerial photos. If the basis of the survey is an aerial photo, provide the source, date, series and the aerial photo identification number.

**The POD/POAs, conveyances, and application to irrigate the place of use were tied using a Topcon FC-6000 field controller. Point data was imported into Topcon Magnet Tools software and converted to Statewide Lambert Projection. Point data was overlaid & compared with aerial imagery for accuracy.**

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## Map Checklist

Please be sure that the map you submit includes ALL the items listed below.

**(Reminder: Incomplete maps and/or claims may be returned.)**

- ☒ Map on polyester film
- ☒ Appropriate scale (1" = 400 feet, 1" = 1320 feet, or the original full-size scale of the county assessor map)
- ☒ Township, Range, Section, Donation Land Claims, and Government Lots
- ☒ If irrigation, number of acres irrigated within each projected Donation Land Claims, Government Lots, Quarter-Quarters
- ☐ Locations of fish screens and/or fish by-pass devices in relationship to point of diversion
- ☒ Locations of meters and/or measuring devices in relationship to point of diversion or appropriation
- ☒ Conveyance structures illustrated (pumps, reservoirs, pipelines, ditches, etc.)
- ☒ Point(s) of diversion or appropriation (illustrated and coordinates)
- ☒ Tax lot boundaries and numbers
- ☒ Source illustrated if surface water
- ☒ Disclaimer ("This map is not intended to provide legal dimensions or locations of property ownership lines")
- ☒ Application and permit number or transfer number
- ☒ North arrow
- ☒ Legend
- ☒ CWRE stamp and signature

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(USE ADDITIONAL SHEETS IF NECESSARY)



# WATER WELL REPORT

STATE OF OREGON

State Well No. 23/32-28G

State Permit No. \_\_\_\_\_

## (1) OWNER:

Name L.L. Jacobs  
Address Burns Oregon

## (2) LOCATION OF WELL:

County Harney Owner's number, if any— #2  
SW 1/4 NE 1/4 Section 28 T. 23S R. 32E W.M.  
Bearing and distance from section or subdivision corner  
2355' S and 1660' W  
from NE cor of section 28

## (3) TYPE OF WORK (check):

New Well ☒ Deepening ☐ Reconditioning ☐ Abandon ☐  
If abandonment, describe material and procedure in Item 11.

## PROPOSED USE (check):

Domestic ☐ Industrial ☐ Municipal ☐  
Irrigation ☒ Test Well ☐ Other ☐

## (5) TYPE OF WELL:

Rotary ☐ Driven ☐  
Cable ☐ Jetted ☐  
Dug ☐ Bored ☐

## (6) CASING INSTALLED:

Threaded ☐ Welded ☐

" Diam. from \_\_\_\_\_ ft. to \_\_\_\_\_ ft. Gage \_\_\_\_\_  
" Diam. from \_\_\_\_\_ ft. to \_\_\_\_\_ ft. Gage \_\_\_\_\_  
" Diam. from \_\_\_\_\_ ft. to \_\_\_\_\_ ft. Gage \_\_\_\_\_

## (7) PERFORATIONS:

Perforated? ☐ Yes ☐ No

Type of perforator used \_\_\_\_\_

SIZE of perforations	in.	by	in.
perforations from _____	ft.	to _____	ft.
perforations from _____	ft.	to _____	ft.
perforations from _____	ft.	to _____	ft.
perforations from _____	ft.	to _____	ft.
perforations from _____	ft.	to _____	ft.

## (8) SCREENS:

Well screen installed ☐ Yes ☐ No

Manufacturer's Name \_\_\_\_\_  
Type \_\_\_\_\_ Model No. \_\_\_\_\_  
Slot size \_\_\_\_\_ Set from \_\_\_\_\_ ft. to \_\_\_\_\_ ft.  
Slot size \_\_\_\_\_ Set from \_\_\_\_\_ ft. to \_\_\_\_\_ ft.

## (9) CONSTRUCTION:

Was well gravel packed? ☐ Yes ☐ No Size of gravel: \_\_\_\_\_  
Gravel placed from \_\_\_\_\_ ft. to \_\_\_\_\_ ft.  
Was a surface seal provided? ☐ Yes ☐ No To what depth? \_\_\_\_\_ ft.  
Material used in seal—  
Did any strata contain unusable water? ☐ Yes ☐ No  
Type of water? \_\_\_\_\_ Depth of strata \_\_\_\_\_  
Method of sealing strata off \_\_\_\_\_

## (10) WATER LEVELS:

Static level \_\_\_\_\_ ft. below land surface Date \_\_\_\_\_  
Artesian pressure \_\_\_\_\_ lbs. per square inch Date \_\_\_\_\_  
Log Accepted by: Submitted by L.L. Jacobs.  
[Signed] \_\_\_\_\_ Date \_\_\_\_\_, 19\_\_\_\_

## (11) WELL TESTS:

Drawdown is amount water level is lowered below static level

Was a pump test made? ☐ Yes ☐ No If yes, by whom? \_\_\_\_\_

Yield: 1000 gal./min. with \_\_\_\_\_ ft. drawdown after \_\_\_\_\_ hrs.

" " " "

" " " "

Ball test gal./min. with \_\_\_\_\_ ft. drawdown after \_\_\_\_\_ hrs.

Artesian flow \_\_\_\_\_ g.p.m. Date \_\_\_\_\_

Temperature of water \_\_\_\_\_ Was a chemical analysis made? ☐ Yes ☐ No

## (12) WELL LOG:

Diameter of well 14 inches.

Depth drilled \_\_\_\_\_ ft. Depth of completed well 250 ft.

Formation: Describe by color, character, size of material and structure, and show thickness of aquifers and the kind and nature of the material in each stratum penetrated, with at least one entry for each change of formation.

MATERIAL	FROM	TO
Well No 2		
14" casing		
0-5' top soil		
5-32' brown quick sand		
32-50' blue clay		
50-69' gravel and water		
69-110' blue clay		
110-116' gravel and water		
116-140' blue clay		
140-162' gravel and water		
162-217' blue clay		
217-228' sand and gray clay		
228-238' gravel and water		
238-250' blue clay		
casing 146'		
perforations 50'-140'		

Work started \_\_\_\_\_ 19\_\_\_\_ Completed \_\_\_\_\_ 19\_\_\_\_

## (13) PUMP:

Manufacturer's Name Perless deep well  
Type: Turbine H.P. 30 HP

## Well Driller's Statement:

This well was drilled under my jurisdiction and this report is true to the best of my knowledge and belief.

NAME \_\_\_\_\_ (Person, firm, or corporation) (Type or print)

Address \_\_\_\_\_

Driller's well number \_\_\_\_\_

[Signed] \_\_\_\_\_ (Well Driller)

License No. \_\_\_\_\_ Date \_\_\_\_\_, 19\_\_\_\_







Received  
OCT 10 2024  
OWRD

2024-08-01 12:07:04

Lat: 43°32'54.86940", Lon: -118°52'48.43500"





2024-09-12 17:55:53

Lat: 43°53'07.75440", Lon: -118°52'37.34760"

11/11/24





2024-09-12 17:46:59  
Lat: 43°32'57.76800" Lon: -118°33'18.00000"





2024-08-01 10:57:50  
Alt: 13033'14.39112" Lon: -118053'15.98586"






2024-08-01 10:59:00  
Lat: 43°33'14.34540", Lon: -118°53'15.99900"

#3





Received  
AUG 10 2024  
OWRD

2024-08-01 11:56:23

Lat: 43°32'44.68800", Lon: -118°52'40.87200"



Received

10 2024

OWRD

2024-08-01 11:53:11

Lat: 43°32'45.25800", Lon: -118°52'54.25980"

FIF





**ALL POINTS  
ENGINEERING & SURVEYING, INC.**

P.O. Box 767  
Terrebonne, Oregon 97760  
541-548-5833

**TRANSMITTAL**

To: Oregon Water Resources Dept  
725 Summer St NE, Suite A  
Salem, OR 97301-1266

Date: 10/6/24  
Attention: Certificate Section  
RE: COBU T-13395

☒ Prints ☐ Plans ☐ Plat ☐ Specifications.

Attached is a Claim of Beneficial Use & Final Proof map for T-13395, Dunbar Silvie's Valley Ranch, LLC.

If you have any questions please don't hesitate to contact me.

Copies	No.	Description
1	1	COBU (17 pages letter bond)
1	2	COBU Maps (4 pages mylar)
1	3	Well logs (3 pages letter bond)
1	4	Site photos (7 pages letter bond)

Signed: \_\_\_\_\_

*Denise Mader*

Received

OCT 10 2024

OWRD